

Manage Complaints

Standard Operating Procedure (SOP)

Claims Payment

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Purpose of this Document

The purpose of this document is to define the standard operating procedures for management of complaints regarding the Claims Management Process in Tshiamiso Trust. It defines the detailed steps executed in this process.

Revision History/Version Control

Date	Version	Summary of Changes	A=Author/C=Contributor/R=Reviewer
30 August 2021	0.1	First draft	A – Francois Naudé
17 December 2021	1.0	Second draft	A – Francois Naudé R – Tina da Cruz
11 January 2022	2.0	Implementation of complaints logged via Service Providers.	A – Francois Naudé
6 December 2023	3.0	Review and addition of complaints channels, enhanced scope and revised timeframes to resolve complaints.	A – Sikhumbuzo Monaledi R – Tina da Cruz

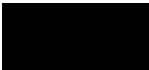
Glossary of Terms

Acronym	Description
BME	Benefit Medical Examinations
NQP	Non-qualifying Period
NQM	Non-qualifying Mine
NQGM	Non-qualifying Gold Mine
QM	Qualifying Mine
QP	Qualifying Period
ROS	Record of Service
RW	Risk Work

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Approval and sign-off

Approval and Sign-off			
Approver name	Role	Date	Signature
Tina da Cruz	Chief Operating Officer	19 June 2024	

1 Process Overview

1.1 Background

The need for stakeholders and claimants to raise a complaint with the Trust relating to the Trust or one of its service providers needs to be met through an efficient mechanism of two-way communication.

Complaints serve as a mirror through which the Trust can measure its policies, systems, processes, people, and service providers. Through this process these elements can be gauged and improved where required. Complaints also serve as a means of managing stakeholder expectations through the communication which ensues from the engagements with stakeholders around any issue raised.

The outcomes from this process would be improvements in the Claims Management Process or adjusted expectations from external stakeholders.

1.2 Sources

The needs of three groups of complainants have been identified. This process needs to cater for complaints from all these groups:

- 1) Potential Claimants.
- 2) Lodging Claimants.
- 3) Stakeholders (as understood through the Tshiamiso Trust stakeholder matrix).

1.3 Scope

The following scope of complaints is covered via this mechanism:

- 1) Complaints about the claims process and treatment of claimants in the process
- 2) Complaints related to the operations of the Trust, including service providers.
- 3) Complaints about claim outcomes.

The scope excludes:

- 1) Fraud and corruption matters which are dealt with in the Whistleblowing process.
- 2) Claim status queries and individuals following up on outstanding matters on the claim. These queries will be responded to via the call centre or through other dedicated channels identified from time to time, as claim status queries.

1.4 Channels to communicate a complaint

Complaints can be raised or logged with the Trust via any of six different channels:

- 1) WhatsApp – through existing groups established to communicate with specific stakeholders.
- 2) Website: www.tshiamisotrusted.com.
- 3) Call Centre (Claimants who live in South Africa can call the Trust's call centre toll free number 080 1000 240 / Claimants who live outside of South Africa can call the number 00 27 10 500 6186) or through SMS – "Please Call Me" capability which is followed by an outbound call-back from the call centre.
- 4) Lodgement Office.
- 5) Medical Service Provider.
- 6) Via email to complaints@tshiamisotrusted.com.
- 7) Via e-mail to communications@tshiamisotrusted.com.

The following table provides a view of which complainant types could raise a complaint per channel.

Complaint Channel	Potential Claimant	Lodging Claimant	Stakeholder
WhatsApp	N	N	Y
SMS	Y	Y	Y
Website	Y	Y	Y
Call Centre	Y	Y	Y
Lodgement Office	Y	Y	Y
Medical Service Provider	Y	Y	Y
Email	Y	Y	Y

2 Process Steps

*01 Report Complaint to Trust Representative	<p>Report Complaint to Trust representative</p> <p>A complainant phones the call centre to log a complaint.</p> <p>A complainant walks into a lodgement office or medical service provider and requests to log a complaint in person.</p> <p>A complainant makes a complaint on social media channels or to public relations service provider or Outreach and Training Manager.</p>
*02 Log Complaint from Trust Website	<p>Log Complaint from Trust Website</p> <p>The complainant logs the complaint through the self-help Smartsheet form on the Trust website.</p>
*03 Log Complaint on behalf of Complainant	<p>Log Complaint on behalf of Complainant</p> <p>The call centre agent or lodgement officer or medical service provider logs the complaint on behalf of the complainant on the Smartsheet form on the Trust website.</p> <p>It is important to obtain the correct details from the complainant. If the complaint relates to a specific claim, then the claimant ID number, Industry number or AP number needs to be captured to investigate the claim.</p> <p>Claim status queries should be handled directly by the call centre agent, lodgement officer or public relations service provider without logging a new complaint.</p> <p>The individual logging the complaint on behalf of the complainant also needs to ensure that the source of the complaint is selected (Call Centre/Lodgement Office/Medical Service Provider/public relations service provider/Outreach & Training).</p>

<p>*04 Log Complaint Internally</p>	<p>Log Complaint Internally</p> <p>The Complaints Secretariat logs the complaint received via email or social media on the Smartsheet form on the Trust website.</p> <p>It is important to obtain the correct details from the complainant. If the complaint relates to a specific claim, then the claimant ID number, Industry number or AP number needs to be captured to investigate the claim.</p> <p>The source of the complaint should be captured clearly in the notes to facilitate a response to the complainant. If received via email a copy of the mail should be attached to the complaint.</p>														
<p>*05 Acknowledge Complaint Receipt</p>	<p>Acknowledge Complaint Receipt</p> <p>Acknowledge complaint receipt:</p> <ol style="list-style-type: none"> 1. Automated step if the email field was completed. 2. Manual step via sms if email field was not completed and received via WhatsApp, and web page. 3. Not required for complaints submitted via call centre or service provider or public relations service provider or Outreach and Training Manager. 														
<p>*06 Review Complaint & Classify</p>	<p>Review Complaint & Classify</p> <p>The Complaints Secretariat assigns the status “New” and reviews the complaint and classifies the Complaint Type correctly.</p> <p>A reminder is also set by the user to respond to the complainant within the stipulated days to respond (see below).</p>														
<p>*07 Provide Status Update to Complainant</p>	<p>Provide Status Update to Complainant</p> <p>If no resolution has been provided after within stipulated days to respond, the Complaints Secretariat contacts the complainant and provides an update on progress with the investigation and/or resolution.</p>														
<p>*08 Assign to internal process owner for resolution</p>	<p>Assign to internal process owner for resolution</p> <p>The Complaints Secretariat assigns the complaint to the internal process owner and assigns a due date for resolution. The complaint status is updated to “Assigned”.</p> <table border="1" data-bbox="454 1603 1461 1968"> <thead> <tr> <th>Process Area</th> <th>Process Owner</th> </tr> </thead> <tbody> <tr> <td>Claims (Lodgement and Processing)</td> <td>Claims Administration Manager</td> </tr> <tr> <td>Benefit Medical Examinations</td> <td>Medical Service Provider Manager</td> </tr> <tr> <td>Service Providers</td> <td>Operations Manager</td> </tr> <tr> <td>Disputes</td> <td>Reviewing Authority Manager</td> </tr> <tr> <td>Payments</td> <td>Payment Administrator</td> </tr> <tr> <td>Claim Determinations</td> <td>Medical Certification Panel Manager / Trust Certification Committee</td> </tr> </tbody> </table> <p>The Process Owner receives an email notification of the complaint and due date.</p>	Process Area	Process Owner	Claims (Lodgement and Processing)	Claims Administration Manager	Benefit Medical Examinations	Medical Service Provider Manager	Service Providers	Operations Manager	Disputes	Reviewing Authority Manager	Payments	Payment Administrator	Claim Determinations	Medical Certification Panel Manager / Trust Certification Committee
Process Area	Process Owner														
Claims (Lodgement and Processing)	Claims Administration Manager														
Benefit Medical Examinations	Medical Service Provider Manager														
Service Providers	Operations Manager														
Disputes	Reviewing Authority Manager														
Payments	Payment Administrator														
Claim Determinations	Medical Certification Panel Manager / Trust Certification Committee														

<p>*09 Review and Resolve Complaint</p>	<p>Review and Resolve Complaint</p> <p>The Process Owner reviews the complaint and then investigates the situation. He/she attempts to resolve the problem, if any.</p> <p>If the complaint was resolved, he/she simply provides feedback or clarification on the Smartsheet sheet and changes the status to “Resolved”.</p>
<p>*10 Consult Communications & Stakeholder Manager</p>	<p>Consult Communications & Stakeholder Manager</p> <p>If Reputational Risk exists, then the Process Owner consults with the Communications and Stakeholder Manager for advice and support in responding to the complaint.</p>
<p>*11 Consult Legal & Compliance Manager</p>	<p>Consult Legal & Compliance Manager</p> <p>If Legal Risk exists, then the Process Owner consults with the Legal and Compliance Manager for advice and support in responding to the complaint.</p>
<p>*12 Record Complaint Resolution on Tracker</p>	<p>Record Complaint Resolution on Tracker</p> <p>The Process Owner records the resolution of the complaint on the complaints tracker including corrective steps taken, if any, and communication with the complainant, if any.</p> <p>The Process Owner then changes the ticket status to “Resolved”.</p>
<p>*13 Respond to Complainant</p>	<p>Respond to Complainant</p> <p>The Complaints Secretariat reviews the resolution and if needed provides the resolution to the Complainant via telephone call, email, or SMS.</p>
<p>*14 Record resolution and close the issue</p>	<p>Record resolution and close the issue</p> <p>The Complaints Secretariat records or expands on the resolution in the relevant field and closes the complaint by changing the status to “Closed”.</p>
<p>*15 Escalate to relevant Executive for Resolution</p>	<p>Escalate to relevant Executive for Resolution</p> <p>If the Process Owner is unable to resolve the complaint, then he/she escalates the complaint verbally or via email to the relevant Executive for assistance and resolution. The Process Owner needs to provide the Executive with all the supporting documentation or information.</p>
<p>*16 Review Complaint</p>	<p>Review Complaint</p> <p>The Executive reviews the complaint and supporting information provided by the Process Owner. The complaint remains assigned to the Process Owner until resolution.</p>
<p>*17 Provide Resolution to Executive</p>	<p>Provide Resolution to Executive</p> <p>If the relevant Executive is unable to resolve the complaint, then he/she escalates the complaint verbally or via email to the Chief Executive Officer for assistance and resolution.</p> <p>The CEO provides resolution to the Executive.</p>

*18 Provide Resolution to Process Owner	<p>Provide Resolution to Process Owner</p> <p>When the Executive has resolved the complaint, he/she provides the resolution verbally or via email to the Process Owner.</p> <p>Following this step the Process Owner will still follow the normal steps for Complaint Resolution.</p>
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3 Time frames – SLA

The Trust will adhere to the following service levels related to complaints resolution:

	Requirement	Service Level
1	Acknowledge complaint receipt – if received via email, WhatsApp, and web page.	24 Hours
2	Respond in writing if email address provided or verbally where no e-mail address provided: <ul style="list-style-type: none"> - Include complaint resolution if resolved. - If not resolved, then provide estimated time frame to resolution and revert with resolution to the complainant at or before the estimated resolution time. 	15 Working Days
3.	Escalate to relevant Executive in instances where resolution cannot be achieved and/or complainant remains unsatisfied with resolution efforts by Process Owner.	25 Working Days (overall resolution days from date complaint received)
4.	Executive escalates to CEO where resolution cannot be achieved.	45 Working Days (overall resolution days from the date complaint received)

4 Reporting

4.1 Daily status tracking

The Process Owners and Complaint Secretariat have direct access to the status on the tracker to view open complaints assigned to them.

4.2 Monthly reporting

Monthly report to Trustees

Complaints logged during the past month:

- Number of complaints logged per complaint category.
- Number of complaints logged per status category.

- Number of complaints logged per complaint source.

All complaints to date

- Number of complaints logged per complaint category.
- Number of complaints logged per status category.
- Number of complaints logged per complaint source.
- Analysis of time to close complaints.
- Trend analysis.

Monthly reporting to COO

Include detailed listing of all complaints logged.

Monthly reporting to Process Owners

- Number of complaints logged per complaint category.
- Number of complaints logged per status category.
- Number of open complaints per Process Owner.

Appendix A – Process Flows

